

<i>Index of Claims</i> 	Application/Control No.	Applicant(s)/Patent Under Reexamination
	10533751	DEPPE ET AL.
	Examiner Futel, Gayla	Art Unit 2609

<input checked="" type="checkbox"/> Rejected	<input type="checkbox"/> Cancelled	<input type="checkbox"/> N Non-Elected	<input type="checkbox"/> A Appeal
<input type="checkbox"/> Allowed	<input type="checkbox"/> Restricted	<input type="checkbox"/> I Interference	<input type="checkbox"/> O Objected

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47
CLAIM		DATE		
Final	Original	02/27/2007		
	1	✓		
	2	✓		
	3	✓		
	4	✓		
	5	✓		
	6	✓		
	7	✓		
	8	✓		
	9	✓		
	10	✓		
	11	✓		